Application or Docket Number

PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2001

CLAIMS AS FILED - PART I								SMALL ENTITY			OTHER THAN	
			(Column 1)		(Column 2)		T	TYPE		OR	SMALL	ENTITY
TOTAL CLAIMS			15					RATE	FEE] [RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE	370.00	OR	BASIC FEE	740.00
TOTAL CHARGEABLE CLAIMS) minus 20=		* Ø			X\$ 9=		OR	X\$18=	
INDEPENDENT CLAIMS			minus 3 =		* <i>'D</i>		Ī	X42=		OR	X84=	
MULTIPLE DEPENDENT CLAIM PRESENT							ľ	+140=		OR	+280=	
* If the difference in column 1 is less than zero, enter "					r "0" in c	column 2	L	TOTAL		OR	TOTAL	740
CLAIMS AS AMENDED - PART II								ا. ،		•	OTHER	
		(Column 1)	(Column 2			(Column 3) SMALI			ENTITY	OR	SMALL	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***	= 01 4144	=	ſ	X42=		OR	X84=	
	FIRST PRESE	NTATION OF M	JLTIPLE DEI	PENDEN	CLAIM		ſ	+140=		OR	+280=	
							L	TOTAL		OR	TOTAL	
		Α	DDIT. FEE			ADDIT. FEE						
		(Column 1) CLAIMS		(Colu	HEST	(Column 3)	Г	T	ADDI-	1 1		ADDI-
AMENDMENT B		REMAINING AFTER AMENDMENT	•	PREVI	IBER OUSLY FOR	PRESENT EXTRA		RATE	TIONAL		RATE	TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		= .		X42=		OR	X84=	·
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						▎┟					
							L	+140=		OR	+280=	
								TOTAL DDIT. FEE		OR	TOTAL ADDIT. FEE	
		(Column 1)		(Colu	mn 2)	(Column 3)	_					
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		NUM PREVI	HEST MBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		=		X42=		OR	X84=	
L	FIRST PRESE	NTATION OF M	ILTIPLE DEPENDENT		T CLAIM	LAIM		1110-			+280=	
*	If the entry in colu	mn 1 is less than t	he entry in col	umn 2, writ	te "0" in co	olumn 3.	L	+140= TOTAL		OR	TOTAL	
**	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."											
	The "Highest Nur	nber Previously Pa	id For" (Total o	r Independ	dent) is the	e highest numbe	er four	nd in the app	oropriate bo	x in co	lumn 1.	